

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/562043

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51	/					
2	/						52	/					
3							53	/					
4							54	/					
5							55	/					
6							56	/					
7							57						
8							58						
9							59						
10							60						
11							61						
12							62						
13							63						
14							64						
15	/						65						
16	/						66						
17	/						67						
18	/						68						
19	/						69	/					
20	/						70	/					
21							71	/					
22							72	/					
23							73	/					
24							74	/					
25							75						
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27							77						
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33							83						
34							84						
35	/						85						
36	/						86						
37	/						87						
38	/						88						
39	/						89	/					
40	/						90	/					
41	/						91	/					
42	/						92	/					
43	/						93	/					
44	/						94	/					
45	/						95	/					
46	/						96	/					
47	/						97	/					
48	/						98	/					
49	/						99	/					
50	/						100	/					
TOTAL IND.	28	↓	28	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	30	←	50	←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	58		78				TOTAL CLAIMS						

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CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101	/					
102	/					
103	/					
104	/					
105	/					
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148						
149						
150						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
151						
152						
153						
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196						
197						
198						
199						
200						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						